Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc

			Schedules	Page 1 of 62		
Fill i	n this inforn	nation to identify your o	case:			
Debt	or 1	Jesse E. Kirkpatri				
Debt	or 2	First Name  Naomi L. Kirkpatr	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF P	ENNSYLVANIA		
Case	e number 1	19-24251				
(if kno	wn)				_	k if this is an
					amen	ided filing
∩tt	ioial Ea	rm 1060um				
		rm 106Sum of Your Assets a	and I iahilities and (	Certain Statistical Informat	ion	12/15
Be as	s complete a mation. Fill o original form	and accurate as possible out all of your schedule	e. If two married people are s first; then complete the in	filing together, both are equally respons formation on this form. If you are filing a box at the top of this page.	sible for supplying	ng correct
· are		<u></u>			Your a	esots
						of what you own
1.		JB: Property (Official Fore 55, Total real estate, from			\$	287,500.00
	1b. Copy line	e 62, Total personal prop	erty, from Schedule A/B		\$	60,120.00
	1c. Copy line	e 63, Total of all property	on Schedule A/B		\$	347,620.00
Part	2: Summ	arize Your Liabilities				
						iabilities nt you owe
2.	Schedule D:	: Creditors Who Have Cla	aims Secured by Property (Offi	icial Form 106D)		•
	2a. Copy the	e total you listed in Colun	nn A, <i>Amount of claim,</i> at the b	pottom of the last page of Part 1 of Schedul	e D \$	342,853.00
3.			Insecured Claims (Official For (priority unsecured claims) fro	m 106E/F) om line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy th	e total claims from Part 2	? (nonpriority unsecured claims	s) from line 6j of Schedule E/F	\$	119,197.00
				Your total liab	ilities \$	462,050.00
Part	3: Summ	arize Your Income and	Expenses			
4.		Your Income (Official Formation Management of Management o			\$	7,787.84
5.		Your Expenses (Official nonthly expenses from lin			\$	7,782.00
Part	4: Answe	er These Questions for	Administrative and Statistica	al Records		
6.	-		r Chapters 7, 11, or 13? on this part of the form. Check	this box and submit this form to the court v	with your other sc	hedules.
7.	■ Yes What kind o	of debt do you have?				
	■ Your d	lebts are primarily cons	umer debts. Consumer debts	s are those "incurred by an individual primar	rily for a personal	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

#### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 2 of 62

Debtor 1 Jesse E. Kirkpatrick
Debtor 2 Naomi L. Kirkpatrick
Case number (if known) 19-24251

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

10,668.66

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	58,099.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	58,099.00

	Cas	se 19-24251-0	JIVIB DUC.			es Page 3 of 62	12/03/19 11	.52.37	Desc
Fill	in this info	rmation to identify	vour case and th			es Page 3 or 6/			
	tor 1	Jesse E. Kirl	kpatrick	Name		Last Name			
Deb	tor 2	Naomi L. Kir	kpatrick						
(Spou	use, if filing)	First Name	Middle	Name		Last Name			
Unit	ed States E	Bankruptcy Court for	the: WESTERN	DISTR	ICT OF P	ENNSYLVANIA			
Cas	e number	19-24251							Check if this is an amended filing
SC n ead hink nforr	hedu ch category it fits best.	Be as complete and a ore space is needed, a	roperty escribe items. List accurate as possible	e. If two	married pe	e. If an asset fits in more than one eople are filing together, both are On the top of any additional pages	equally responsib	le for suppl	ying correct
Part	1: Describ	e Each Residence. Bu	uilding, Land, or Ot	her Real	Estate Yo	ou Own or Have an Interest In			
	No. Go to P Yes. Where				: <b>is the pro</b> Single-fal	ding, land, or similar property?  perty? Check all that apply mily home r multi-unit building	the amount of an	y secured cl	s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
				Condominium or cooperative  Manufactured or mobile home		Current value of		Current value of the	
	Sarver	PA	16055-0000				entire property?	p	ortion you own?
	City	State	ZIP Code		Investme Timeshar	ent property	\$287,50	0.00_	\$287,500.00
					Other	erest in the property? Check one		ple, tenanc	ownership interest by by the entireties, or
					Debtor 1	only	Tenants by t	he Entire	ties
	Butler					•			
	County					and Debtor 2 only			nity property
				Othe	r informati	one of the debtors and another ion you wish to add about this ite fication number:	m, such as local	ns)	
				*Fai	r Market	t Value determined by a cu	ırrent CMA		
						•			
		ollar value of the po				ies from Part 1, including any	entries for		\$287,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt Debt		esse E. Kirkp Iaomi L. Kirk <mark>ı</mark>			Case number (if known)	19-24251
3. <b>C</b> a	ars, vans,	trucks, tractor	rs, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	Buick		Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on <i>Schedule D:</i>
	Model:	Enclave		Debtor 1 only		ve Claims Secured by Property.
	Year:	2014		Debtor 2 only	Current value of t	he Current value of the
	Approxir	nate mileage:	60,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:		At least one of the debtors and another		
	1	on: 107 Moha PA 16055	awk Drive,	☐ Check if this is community property (see instructions)	\$19,075	.00 \$19,075.00
		Dodge			Do not deduct secu	ured claims or exemptions. Put
3.2		Ram 1500		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model: Year:	2017		☐ Debtor 1 only ☐ Debtor 2 only	Creditors who hav	ve Claims Secured by Property.
		nate mileage:	25,000	■ Debtor 2 only  Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
		formation:		■ Debtor 1 and Debtor 2 only  ■ At least one of the debtors and another	entire property:	portion you own:
	Locati	on: 107 Moha	wk Drive,	Actions one of the deplots and another		
		PA 16055		☐ Check if this is community property (see instructions)	\$27,825	.00 \$27,825.00
5 <b>A</b>				n for all of your entries from Part 2, includin that number here		\$46,900.00
			I and Household Ite			
·		, ,	·	terest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	xamples: No	goods and fur Major appliance escribe		, china, kitchenware		
		;	Summary Availa	ld Goods & Furnishings able Upon Request Iohawk Drive, Sarver PA 16055		\$10,000.00
E	l No	Televisions and		eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; music co	ollections; electronic devices
				Nintendo Switch, Home Computer		\$700.00

Official Form 106A/B Schedule A/B: Property page 2

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 5 of 62

Debtor Debtor			Case number (if known)	19-24251
		d figurines; paintings, prints, or other artwork; books, pictures, ions, memorabilia, collectibles	or other art objects; stamp, coin.	or baseball card collections;
	No			
□ Y	es. Describe			
Exa	musical instr	ographic, exercise, and other hobby equipment; bicycles, pool	tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
ЦY	es. Describe			
10. <b>Fir</b> e <i>Ex</i> □ N	camples: Pistols, rifle	es, shotguns, ammunition, and related equipment		
■ Y	es. Describe			
		Couple Rifles & Shotguns Location: 107 Mohawk Drive, Sarver PA 16055		\$400.00
	<i>camples:</i> Everyday cl	lothes, furs, leather coats, designer wear, shoes, accessories		
		Clathing 9 Chang		
		Clothing & Shoes Location: 107 Mohawk Drive, Sarver PA 16055		\$1,000.00
	<i>camples:</i> Everyday je	welry, costume jewelry, engagement rings, wedding rings, he  Wedding Bands, Engagement Ring Location: 107 Mohawk Drive, Sarver PA 16055	irloom jewelry, watches, gems, g	gold, silver \$1,000.00
Ex	n-farm animals camples: Dogs, cats, lo 'es. Describe	birds, horses  2 Cats, 1 Dog Location: 107 Mohawk Drive, Sarver PA 16055		\$0.00
		Location. 107 Monawk Drive, Salver PA 16055		Ψ0.00
	-	nd household items you did not already list, including any formation	health aids you did not list	
		of all of your entries from Part 3, including any entries for number here		\$13,100.00
	Describe Your Finar			
Do yo	u own or have any l	legal or equitable interest in any of the following?		Current value of the portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 3

claims or exemptions.

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc

Dobtor 1	locco E Kirknotriak	Schedules Page 6 of 62	
Debtor 1 Debtor 2	Jesse E. Kirkpatrick Naomi L. Kirkpatrick	Case number (if known	19-24251
16. <b>Cash</b>			
Examp □ No	oles: Money you have in your wallet, in yo	r home, in a safe deposit box, and on hand when you file your peti	tion
_ 100			
		Cash	\$20.00
		accounts; certificates of deposit; shares in credit unions, brokerage unts with the same institution, list each.	houses, and other similar
		Institution name:	
	47.4 Objection	Northwest Pank	\$100.00
	17.1. Checking	Northwest Bank	\$100.00
Exam <sub>l</sub> ■ No	, mutual funds, or publicly traded stocoles: Bond funds, investment accounts w	brokerage firms, money market accounts	
			at in an IIC namenanahin and
joint v	ublicly traded stock and interests in in Tenture	orporated and unincorporated businesses, including an intere	est in an LLC, partnership, and
■ No			
⊔ Yes.	Give specific information about them Name of entity:	% of ownership:	
Negoti	<i>iable instrument</i> s include personal check	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them.	
■ No			
☐ Yes.	Give specific information about them		
	Issuer name:		
	ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 40°	s), 403(b), thrift savings accounts, or other pension or profit-sharing	g plans
■ No			
☐ Yes.	List each account separately.  Type of account:	Institution name:	
Your s Examp		e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications compa	anies, or others
■ No □ Yes.		Institution name or individual:	
	ies (A contract for a periodic payment of	noney to you, either for life or for a number of years)	
■ No			
☐ Yes	Issuer name and descript	1.	
	ts in an education IRA, in an account i C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition p	rogram.
Yes	Institution name and desc	otion. Separately file the records of any interests.11 U.S.C. § 521(c	<b>;</b> ):
	Old 529 Savings Plan	hat has not been paid into in approximately ten years	\$0.00

■ No

☐ Yes. Give specific information about them...

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 7 of 62

	ebtor 2	Naomi L. Kirkpa		Case number (if known) 19	9-24251
	Exampl ■ No	, copyrights, trade les: Internet domain Give specific inform	marks, trade secrets, and other intellectual pro names, websites, proceeds from royalties and lice ation about them	riperty ensing agreements	
27.	License Exampl ■ No	s, franchises, and	other general intangibles s, exclusive licenses, cooperative association holdi	ngs, liquor licenses, professional licenses	
Me	oney or p	roperty owed to y	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	inds owed to you	ation about them, including whether you already file	ed the returns and the tax years	
	■ No		p sum alimony, spousal support, child support, ma	uintenance, divorce settlement, property set	ttlement
	Exampl ■ No		disability insurance payments, disability benefits, s I loans you made to someone else	ick pay, vacation pay, workers' compensa	tion, Social Security
		s in insurance polles: Health, disability	icies y, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insurance	
	Yes. N	lame the insurance	company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
			Term Life Insurance with No Cash Value	Naomi Kirkpatrick	\$0.00
			Term Life Insurance with No Cash Value	Jesse Kirkpatrick	\$0.00
	If you and someon		nat is due you from someone who has died f a living trust, expect proceeds from a life insurance ation	ce policy, or are currently entitled to receive	e property because
	Exampl ■ No		es, whether or not you have filed a lawsuit or most you have filed a lawsuit or most you have filed a lawsuit or most your most you have filed a lawsuit or most your		
	□ No	ontingent and unli	quidated claims of every nature, including cou	nterclaims of the debtor and rights to se	et off claims
	1 <del>c</del> 5. 1	COSCIDE EACH CIAIII	1		

Official Form 106A/B Schedule A/B: Property page 5

Robert L. Sanford, Jr. and Joann M. Sanford vs. Jesse E.

\*Debtor is represented by R. Douglass Klaber, Jr. Esq. and Diana M. O'Connell, Esq. of Robb Leonard Mulvihill, LLP

**Fitzpatrick** GD-19-005795

Jesse E. Kirkpatrick Debtor 1 Naomi L. Kirkpatrick Debtor 2

Case number (if known) 19-24251

	nt and will not	\$0.00		
35. Any financial assets you did not alre	eady list			
<ul><li>■ No</li><li>□ Yes. Give specific information</li></ul>				
36. Add the dollar value of all of your e for Part 4. Write that number here				\$120.00
Part 5: Describe Any Business-Related Prop	oerty You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. Do you own or have any legal or equitable	interest in any business-relat	ed property?		
No. Go to Part 6.				
☐ Yes. Go to line 38.				
Part 6: Describe Any Farm- and Commercial If you own or have an interest in farmlar		ı Own or Have an Interes	st In.	
46. Do you own or have any legal or equ	itable interest in any farm-	or commercial fishir	ng-related property?	
No. Go to Part 7.				
☐ Yes. Go to line 47.				
Part 7: Describe All Property You Own	or Have an Interest in That Yo	u Did Not List Above		
53. Do you have other property of any king Examples: Season tickets, country clu ■ No		?		
☐ Yes. Give specific information			I	
54. Add the dollar value of all of your e	entries from Part 7. Write th	at number here		\$0.00
Part 8: List the Totals of Each Part of thi	s Form			
55. Part 1: Total real estate, line 2				\$287,500.00
56. Part 2: Total vehicles, line 5		\$46,900.00		
57. Part 3: Total personal and househo	old items, line 15	\$13,100.00		
58. Part 4: Total financial assets, line 3	6	\$120.00		
59. Part 5: Total business-related prop	erty, line 45	\$0.00		
60. Part 6: Total farm- and fishing-relat	ed property, line 52	\$0.00		
61. Part 7: Total other property not list	ed, line 54 +	\$0.00		
62. <b>Total personal property.</b> Add lines 5	66 through 61	\$60,120.00	Copy personal property to	otal <b>\$60,120.00</b>
63. Total of all property on Schedule A	<b>/B</b> . Add line 55 + line 62			\$347,620.00

Official Form 106A/B Schedule A/B: Property page 6 Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc

Fill in this inforr	mation to identify your	case:		
Debtor 1	Jesse E. Kirkpatr	ick		
	First Name	Middle Name	Last Name	
Debtor 2	Naomi L. Kirkpatı	rick		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT C	OF PENNSYLVANIA	
_	19-24251			
(if known)				☐ Check if the amended

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	rt 1: Identify the Property You Claim as E	exempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.		Specific laws that allow exemption					
	107 Mohawk Drive Sarver, PA 16055 Butler County *Fair Market Value determined by a current CMA Line from Schedule A/B: 1.1	\$287,500.00		\$272.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)					
	Basic Household Goods & Furnishings Summary Available Upon Request Location: 107 Mohawk Drive, Sarver PA 16055 Line from Schedule A/B: 6.1	\$10,000.00		\$10,000.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)					
	Playstation and Nintendo Switch, Home Computer Location: 107 Mohawk Drive, Sarver PA 16055 Line from Schedule A/B: 7.1	\$700.00		\$700.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)					
	Couple Rifles & Shotguns Location: 107 Mohawk Drive, Sarver PA 16055 Line from Schedule A/B: 10.1	\$400.00		\$400.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)					

## Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 10 of 62

otor 1 Jesse E. Kirkpatrick otor 2 Naomi L. Kirkpatricl		Concadics		Case number (if known)	19-24251
Brief description of the property Schedule A/B that lists this prop	and line on	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Clothing & Shoes Location: 107 Mohawk Di	rive, Sarver	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
<b>PA 16055</b> Line from <i>Schedule A/B</i> : <b>11.1</b>	·			100% of fair market value, up to any applicable statutory limit	
Wedding Bands, Engage Location: 107 Mohawk D		\$1,000.00	•	\$1,000.00	11 U.S.C. § 522(d)(4)
<b>PA 16055</b> Line from <i>Schedule A/B</i> : <b>12.1</b>				100% of fair market value, up to any applicable statutory limit	
2 Cats, 1 Dog Location: 107 Mohawk Di	rive, Sarver	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
PA 16055 Line from Schedule A/B: 13.1	•			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1		\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
Checking: Northwest Bar Line from Schedule A/B: 17.1	nk	\$100.00	•	\$100.00	11 U.S.C. § 522(d)(5)
zine nem conceane / v.z. TTT				100% of fair market value, up to any applicable statutory limit	
Old 529 Savings Plan tha been paid into in approxi		\$0.00		\$0.00	11 U.S.C. § 522(b)(3)(B)
years Line from Schedule A/B: 24.1				100% of fair market value, up to any applicable statutory limit	
Term Life Insurance with Value	No Cash	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Naomi Kirkp Line from Schedule A/B: 31.1	atrick			100% of fair market value, up to any applicable statutory limit	
Term Life Insurance with Value	No Cash	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Jesse Kirkpa Line from Schedule A/B: 31.2				100% of fair market value, up to any applicable statutory limit	
Robert L. Sanford, Jr. and Sanford vs. Jesse E. Fitz		\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
GD-19-005795 *Debtor is represented by Douglass Klaber, Jr. Esq M. O'Connell, Esq. of Rot Mulvihill, LLP *Debtor is being sued for accident and will not Line from Schedule A/B: 34.1	y R. . and Diana ob Leonard			100% of fair market value, up to any applicable statutory limit	
Mulvihill, LLP *Debtor is being sued for accident and will not Line from Schedule A/B: 34.1  Are you claiming a homeste (Subject to adjustment on 4/01)  No	an auto ad exemption o	years after that for case	ses fil	led on or after the date of adjustmer	,

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc

Case 19-24231-Civ	Schedules Page 11	of 62	0/13 11.32.37	Desc
Fill in this information to identify you				
Debtor 1 Jesse E. Kirkpa	trick			
First Name	Middle Name Last Name		-	
Debtor 2 Naomi L. Kirkpa	atrick			
(Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court for the	WESTERN DISTRICT OF PENNSYLVANIA		-	
Case number 19-24251				
(if known)				if this is an
			amend	led filing
Be as complete and accurate as possible.	S Who Have Claims Secured If two married people are filing together, both are equout, number the entries, and attach it to this form. On	ually responsible for s	upplying correct informa	
number (if known).	out,	and top of any adding	pagee,e jea	
1. Do any creditors have claims secured by	y your property?			
☐ No. Check this box and submit t	his form to the court with your other schedules. Yo	u have nothing else	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
	s a particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Keybank/usb Cc	Describe the property that secures the claim:	\$19,519.00	\$287,500.00	\$0.00
Creditor's Name	107 Mohawk Drive Sarver, PA 16055 Butler County *Fair Market Value determined by a			
4910 Tiedeman Road Brooklyn, OH 44144	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or sectoral loan)	ured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Home Equi	ty Line of Credit		
Opened				

Last 4 digits of account number

7479

10/18 Last Active

Date debt was incurred 9/23/19

## Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 12 of 62

Debtor 1 Jesse E. Kirkpatrick		Case number (if known)	19-24251	
First Name Middle N	ame Last Name			
Debtor 2 Naomi L. Kirkpatrick First Name Middle N	ame Last Name			
o tae	2001.10			
2.2 <b>PSECU</b>	Describe the property that secures the claim:	\$31,358.00	\$27,825.00	\$3,533.00
P.o. Box 1006 Harrisburg, PA 17108	2017 Dodge Ram 1500 25,000 miles Location: 107 Mohawk Drive, Sarver PA 16055 As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or so car loan)	ecured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)  Automob	ile		
Opened 02/19 Last Active 9/20/19	Last 4 digits of account number 0004			
2.3 <b>PSECU</b>	Describe the property that secures the claim:	\$24,267.00	\$19,075.00	\$5,192.00
Creditor's Name	2014 Buick Enclave 60,000 miles Location: 107 Mohawk Drive, Sarver PA 16055 As of the date you file, the claim is: Check all that			
P.o. Box 1006 Harrisburg, PA 17108	apply.  Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or so car loan)	ecured		
■ Debtor 1 and Debtor 2 only	cai ioaii)			
	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	′			
☐ At least one of the debtors and another☐ Check if this claim relates to a community debt	Statutory lien (such as tax lien, mechanic's lien)	ile		
☐ Check if this claim relates to a	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	ile		

## Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 13 of 62

Debtor 1 Jesse E. I	<u> </u>		-	Case number (if known)	19-24251	
Pirst Name Debtor 2 Naomi L.	Middle N Kirknatrick	ame Last Name				
First Name	Middle N	ame Last Name	-			
Wells Forms H	lama					
Wells Fargo H Mortgage	iome	Describe the property that secures the	ne claim:	\$267,709.00	\$287,500.00	\$0.00
Creditor's Name		107 Mohawk Drive Sarver, PA	A 16055			
		Butler County				
		*Fair Market Value determine current CMA	ed by a			
Do Doy 40225		As of the date you file, the claim is: 0	Check all that			
Po Box 10335 Des Moines, I		apply.  Contingent				
Number, Street, City,		Unliquidated				
	•	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as m car loan)	nortgage or se	ecured		
■ Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mech	hanic's lien)			
At least one of the del		☐ Judgment lien from a lawsuit				
☐ Check if this claim recommunity debt	elates to a	Other (including a right to offset)	Mortgage			
community debt						
	Opened					
	08/17 Last Active					
Date debt was incurred		Last 4 digits of account numb	er 9451			
				*****	1	
		column A on this page. Write that numb the dollar value totals from all pages.	er here:	\$342,853		
Write that number her		the donar value totals from all pages.		\$342,853	.00	
Part 2: List Others	to Be Notified fo	or a Debt That You Already Listed				
		e notified about your bankruptcy for a	debt that yo	u already listed in Part 1 F	or example if a collection	agency is
trying to collect from yo	ou for a debt you o	owe to someone else, list the creditor in t you listed in Part 1, list the additional	Part 1, and	then list the collection age	ncy here. Similarly, if you I	have more
debts in Part 1, do not f	ill out or submit th	nis page.	or ountered file	ioi ii you do not navo adan	nonar porconic to be notine	a for any
Name Number S	treet, City, State &	Zin Codo				
Keybank/usb		Zip Code	On wr	nich line in Part 1 did you ente	er the creditor?	
Attn: Bankru			Last 4	Last 4 digits of account number		
4910 Tiedema Brooklyn, OF						
Brooklyn, OF	1 44 144					
Name Number S	treet, City, State &	Zin Codo				
PSECU	illeet, Oity, State &	Zip Code	On wr	nich line in Part 1 did you ente	er the creditor?	
Attention: Ba			Last 4	digits of account number	-	
Po Box 6701: Harrisburg, F						
	A 17 100					
Name Number S	treet, City, State &	Zin Code	0 1			
PSECU	ineer, Only, State &	Zip Code	On wr	nich line in Part 1 did you ente	er the creditor?	
Attention: Ba			Last 4	digits of account number	-	
Po Box 6701: Harrisburg, F						
inarrisburg, F	V 11 100					
Name Number S	treet, City, State &	7in Code	•			
Wells Fargo I		zip oude	On wh	nich line in Part 1 did you ente	er the creditor?	
Attn: Written	Corresponder	nce/Bankruptcy	Last 4	digits of account number	-	
Mac#2302-04						
Des Moines,	IA SUSUB					

## Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 14 of 62

Debtor 1 Jesse E. Kirkpatrick Case number (if known) 19-24251

Pebtor 2 Naomi L. Kirkpatrick
First Name Middle Name Last Name

Last Name
Last Name

	Case 19-24251-CMB DOC	Schedules Page 15		03/19 11.52.3	<i>i</i> Desc
Fill ir	n this information to identify your case:	Schedules Paue I.	01.02		
	• • • • • • • • • • • • • • • • • • • •				
Debto		le Name Last Name			
Debto	or 2 Naomi L. Kirkpatrick				
(Spous		le Name Last Name			
Unite	d States Bankruptcy Court for the: WESTER	RN DISTRICT OF PENNSYLVANIA			
Case (if know	number 19-24251			_	heck if this is an mended filing
Sch	cial Form 106E/F edule E/F: Creditors Who Hav				12/15
nny ex Sched Sched eft. At name a	complete and accurate as possible. Use Part 1 for lecutory contracts or unexpired leases that could in ule G: Executory Contracts and Unexpired Leases ule D: Creditors Who Have Claims Secured by Pro tach the Continuation Page to this page. If you hat and case number (if known).	result in a claim. Also list executory c (Official Form 106G). Do not include a perty. If more space is needed, copy t we no information to report in a Part, c	ontracts on Schedu any creditors with pa he Part you need, fil	le A/B: Property (Official artially secured claims I it out, number the ent	al Form 106A/B) and on that are listed in tries in the boxes on the
Part '					
_	o any creditors have priority unsecured claims ag	ainst you?			
	No. Go to Part 2.				
	Yes.				
Part 2	2: List All of Your NONPRIORITY Unsecu	red Claims			
	to any creditors have nonpriority unsecured claims				
_	_		dulaa		
	☐ No. You have nothing to report in this part. Submit t	nis form to the court with your other sche	dules.		
	Yes.				
ur th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each cla nan one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify what t	ype of claim it is. Do r	ot list claims already inc	luded in Part 1. If more
					Total claim
4.1	Bank Of America	Last 4 digits of account number	7655		\$14,436.00
	Nonpriority Creditor's Name	-			
	Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 06/01 7/02/19	Last Active	-
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	/	
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or d	ivorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts	
	Yes	■ Other. Specify Credit Card			
		. ,			_

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 16 of 62

	or 1 Jesse E. Kirkpatrick Naomi L. Kirkpatrick		Case number (if known) 19-24251	
4.2	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	7367	\$5,217.00
	Po Box 6217 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim	Opened 10/16 Last Active 7/01/19 s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify ☐ Credit Card	ration agreement or divorce that you did not g plans, and other similar debts	
4.3	Citibank	Last 4 digits of account number	5283	\$4,235.00
	Nonpriority Creditor's Name Po Box 6217 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/18 Last Active 7/01/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	4814	\$1,476.00
	Po Box 6497 Sioux Falls, SD 57117	When was the debt incurred?	Opened 07/18 Last Active 7/03/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other, Specify Charge Acc	count	

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 17 of 62

	r 1 Jesse E. Kirkpatrick r 2 Naomi L. Kirkpatrick		Case number (if known) 19-24251	
4.5	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	2061	\$8,723.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 02/12 Last Active 6/22/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	1	
4.6	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	4761	\$8,319.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 08/12 Last Active 6/22/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	Contingent		
	■ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify	.1	
		Educationa	II	
4.7	Department of Education/Nelnet	Last 4 digits of account number	8055	\$5,132.00
	Nonpriority Creditor's Name  Po Box 82561  Lincoln, NE 68501	When was the debt incurred?	Opened 01/17 Last Active 6/22/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	ul	

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 18 of 62

Debto Debto	r 1 Jesse E. Kirkpatrick r 2 Naomi L. Kirkpatrick		Case number (if known) 19-24251	
4.8	Department of Education/Nelnet	Last 4 digits of account number	5059	\$4,845.00
	Nonpriority Creditor's Name  Po Box 82561 Lincoln, NE 68501  Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 09/13 Last Active 6/22/19 is: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent		
	_	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not	
	<u> </u>	Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No		g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	II	
4.9	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	4661	\$4,780.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 08/12 Last Active 6/22/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another	<u></u> '	d Claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa	ıl	
4.1 0	Department of Education/Nelnet	Last 4 digits of account number	7955	\$4,105.00
	Nonpriority Creditor's Name  Po Box 82561  Lincoln, NE 68501	When was the debt incurred?	Opened 01/17 Last Active 6/22/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 19 of 62

Debtor Debtor	1 Jesse E. Kirkpatrick 2 Naomi L. Kirkpatrick		Case number (if known) 19-24251	
4.1 1	Department of Education/NeInet	Last 4 digits of account number	4255	\$3,931.00
	Nonpriority Creditor's Name Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 05/17 Last Active 6/22/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l alaim.	
	At least one of the debtors and another	<u> </u>	d Claim.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	
4.1	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	7861	\$3,673.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 09/11 Last Active 6/22/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	
4.1	Department of Education/NeInet Nonpriority Creditor's Name	Last 4 digits of account number	5159	\$3,534.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 09/13 Last Active 6/22/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l	

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 20 of 62

Debtor 2	Jesse E. Kirkpatrick Naomi L. Kirkpatrick		Case number (if known) 19-24251	
	Department of Education/NeInet Nonpriority Creditor's Name	Last 4 digits of account number	6561	\$2,936.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 06/11 Last Active 6/22/19	
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	ng plans, and other similar debts	
	La res	Educationa	al	
4.1				
5	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	8555	\$2,807.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 08/17 Last Active 6/22/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa	al .	
4.1	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	8455	\$2,046.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 08/17 Last Active 6/22/19	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	☐ Other. Specify		
		Educationa	al	

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 21 of 62

Debt	or 2 Naomi L. Kirkpatrick		Case number (if known)	19-24251	
4.1 7	Kohls/Capital One	Last 4 digits of account number	7337		\$162.00
<u>'                                     </u>	Nonpriority Creditor's Name				·
	Po Box 3115 Milwaukee, WI 53201	When was the debt incurred?	Opened 12/14 Last A 3/29/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce the	at you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debt	s	
	Yes	Other. Specify Charge Acc	count		
4.1 8	MOHELA	Last 4 digits of account number	0001		\$1,913.00
	Nonpriority Creditor's Name  633 Spirit Drive	When was the debt incurred?	Opened 08/08 Last A 9/14/19	Active	
	Chesterfield, MO 63005  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce the	at you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debt	s	
	Yes	Other. Specify			
		Educationa	<u> </u>		
4.1 9	MOHELA  Nonpriority Creditor's Name	Last 4 digits of account number	0002		\$1,355.00
	633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	Opened 08/09 Last A 9/14/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	<ul><li>■ Student loans</li><li>□ Obligations arising out of a sepa</li></ul>	ration agreement or divorce the	at you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debt	S	
	Yes	Other. Specify			

**Educational** 

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 22 of 62

Debt	Naomi L. Kirkpatrick		Case number (if known)	19-24251	
4.2	PSECU	Last 4 digits of account number	0002		\$10,402.00
0	Nonpriority Creditor's Name				· ·, · · ·
	P.o. Box 1006 Harrisburg, PA 17108	When was the debt incurred?	Opened 12/18 Last 5/17/19	t Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts	
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	PSECU	Last 4 digits of account number	0009		\$10,268.00
	Nonpriority Creditor's Name	_	0 140/40 1		
	P.o. Box 1006 Harrisburg, PA 17108	When was the debt incurred?	Opened 12/10 Last 7/01/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	PNC Bank	Last 4 digits of account number	7496		\$13,443.00
	Nonpriority Creditor's Name				. ,
	Po Box 3180 Pittsburgh, PA 15230	When was the debt incurred?	Opened 10/13 Last 6/29/19	t Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	■ Other, Specify Credit Card	I		

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 23 of 62

Debtor 1 Debtor 2	Jesse E. Kirkpatrick Naomi L. Kirkpatrick		Case number (if known) 19-24251	
4.2 3	Robert L. Sanford, Jr. and	Last 4 digits of account number	5795	\$0.00
	Nonpriority Creditor's Name Joann M. Sanford 512 Grandview Avenue West Mifflin, PA 15122	When was the debt incurred?	2017	-
1	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
l	Debtor 1 only	☐ Contingent		
l	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
ı	At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
ı	☐ Check if this claim is for a community	☐ Student loans		
	debt		paration agreement or divorce that you did not	
	s the claim subject to offset?	report as priority claims  Debts to pension or profit-shari	ing plane, and other similar debte	
_	No			
	☐ Yes	Other. Specify Auto Accid	dent	-
	Wells Fargo Bank NA	Last 4 digits of account number	6924	\$1,459.00
	Nonpriority Creditor's Name  Credit Bureau Dispute Resoluti  Des Moines, IA 50306	When was the debt incurred?	Opened 12/18 Last Active 6/16/19	
1	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Occasion month		
_	_	☐ Contingent		
_	Debtor 2 only	☐ Unliquidated		
_	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	ed claim:	
	At least one of the debtors and another	Student loans	ou diami.	
(	☐ Check if this claim is for a community debt s the claim subject to offset?		paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ing plans, and other similar debts	
_	⊒ Yes	■ Other Specify Credit Car	01	
	<b>—</b> 165	Other. Specify Ordan Gar	<u> </u>	-
is trying have m notified Name and	g to collect from you for a debt you owe to so ore than one creditor for any of the debts the for any debts in Parts 1 or 2, do not fill out a Address	about your bankruptcy, for a debt that someone else, list the original creditor i lat you listed in Parts 1 or 2, list the add or submit this page.  On which entry in Part 1 or Part 2 did yo		y here. Similarly, if you ditional persons to be
	of America		Part 1: Creditors with Priority Unsecured Cla	
	ankruptcy 982238		Part 2: Creditors with Nonpriority Unsecured	Claims
	o, TX 79998			
		Last 4 digits of account number		
Name and		On which entry in Part 1 or Part 2 did yo	_	
Citiban	k ecovery/Centralized		Part 1: Creditors with Priority Unsecured Cla	
Bankru			Part 2: Creditors with Nonpriority Unsecured	Claims
St Loui	s, MO 63179	Last 4 digits of account number		
Name and	1 Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Citiban	k		$\square$ Part 1: Creditors with Priority Unsecured Cla	ims
Attn: R Bankru	ecovery/Centralized ptcy	•	Part 2: Creditors with Nonpriority Unsecured	Claims

#### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 24 of 62

Debtor 1 Jesse E. Kirkpatrick 19-24251 Debtor 2 Naomi L. Kirkpatrick Case number (if known) Po Box 790034 St Louis, MO 63179 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citibank/The Home Depot Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Recovery/Centralized Part 2: Creditors with Nonpriority Unsecured Claims **Bankruptcy** Po Box 790034 St Louis, MO 63179 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Department of Education/Nelnet Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Department of Education/Nelnet Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Department of Education/Nelnet Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Department of Education/Nelnet** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Department of Education/Nelnet Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Department of Education/Nelnet Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Department of Education/Nelnet Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Department of Education/Nelnet Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims Po Box 82505 Lincoln, NE 68501 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address

Official Form 106 E/F

## Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 25 of 62

Debtor 1 Jesse E. Kirkpatrick Debtor 2 Naomi L. Kirkpatrick		Case number (if known) 19-24251
Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501	Line <b>4.14</b> of ( <i>Check one</i> ):	□ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address  Department of Education/Nelnet  Attn: Claims  Po Box 82505  Lincoln, NE 68501	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
Ellicolli, NE 00301	Last 4 digits of account number	
Name and Address Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501	On which entry in Part 1 or Part 2 did Line 4.16 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Feldstein Grinberg Lang & McKee, P.C. 428 Boulevard of the Allies Suite 600 Pittsburgh, PA 15219	On which entry in Part 1 or Part 2 did Line 4.23 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	5795
Name and Address Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201	On which entry in Part 1 or Part 2 did Line 4.17 of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Willwaukee, Wi 33201	Last 4 digits of account number	
Name and Address MOHELA Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	On which entry in Part 1 or Part 2 did the Line 4.18 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address MOHELA Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	On which entry in Part 1 or Part 2 did Line 4.19 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address PSECU Attention: Bankruptcy Po Box 67013	On which entry in Part 1 or Part 2 did the Line 4.20 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17106	Last 4 digits of account number	
Name and Address PSECU Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106	On which entry in Part 1 or Part 2 did the Line 4.21 of (Check one):	you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address PNC Bank Attn: Bankruptcy Po Box 94982: Mailstop Br-Yb58-01-5	On which entry in Part 1 or Part 2 did Line 4.22 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 26 of 62

Debtor 1 Jesse E. Kirkpatrick	Jenedales Ta	gc 20 01 02	19-24251	
Debtor 2 Naomi L. Kirkpatrick		Case number (if known)	19-24251	
Cleveland, OH 44101				
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?		
Wells Fargo Bank NA	Line 4.24 of (Check one):	☐ Part 1: Creditors with Prior	ty Unsecured Claims	
Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328		Part 2: Creditors with Nonp	riority Unsecured Claims	
	Last 4 digits of account number			

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	58,099.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
	Ch	you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	61,098.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	119,197.00

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc

			11 1 (1111. 7 / 1111.17	
Fill in this inform	nation to identify your	case:		
Debtor 1	Jesse E. Kirkpatr	ick		
	First Name	Middle Name	Last Name	
Debtor 2	Naomi L. Kirkpat	rick		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA	
Case number (if known)	19-24251			☐ Check if this is an amended filing

#### Official Form 106G

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc

		Schedules	Page 28 of	62
Fill in this	s information to identify your c	ase:		
Debtor 1	Jesse E. Kirkpatrio	<b>ck</b>		
Dalatana	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fil	Naomi L. Kirkpatri  First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT OF F	PENNSYLVANIA	
Case num	nber <b>19-24251</b>			
(if known)	13-24231			☐ Check if this is an amended filing
Officia	I Form 106H			
Sched	dule H: Your Code	ebtors		12/15
■ No □ Ye	s	lived in a community prope	rty state or territory	? (Community property states and territories include
	. Go to line 3. s. Did your spouse, former spous	se, or legal equivalent live wit	h you at the time?	
in line Form	e 2 again as a codebtor only if	that person is a guarantor	or cosigner. Make sı	f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP	Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	•
3.2	Name  Number Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	City	State	ZIP Codo	

1. Fill in your employr information.  If you have more tha attach a separate pa information about ad employers.  Include part-time, se self-employed work.  Occupation may include or homemaker, if it a	an one job, age with Iditional easonal, or ude student	Employment status  Occupation  Employer's name  Employer's address	Debtor 1  ■ Employed □ Not employed  Transport Team  UPMC  c/o Childrens Hospital of Pittsburgh 600 Grant Street Floor 56 Pittsburgh, PA 15219	Debtor 2 or non-filing spouse  Employed  Not employed  Clinician  UPMC  c/o UPMC Presbyterian Shadyside 600 Grant Street Floor 56 Pittsburgh, PA 15219
1. Fill in your employr information.  If you have more tha attach a separate pa information about ad employers.  Include part-time, se	n one job, age with Iditional	Occupation	■ Employed □ Not employed  Transport Team	■ Employed □ Not employed Clinician
1. Fill in your employr information.  If you have more tha attach a separate pa information about ad employers.	n one job, age with Iditional	. ,	■ Employed □ Not employed	■ Employed □ Not employed
Fill in your employr information.  If you have more tha attach a separate pa information about ad	n one job, ige with	Employment status	■ Employed	■ Employed
Fill in your employr information.  If you have more tha	ın one job,	Employment status	_	_
1. Fill in your employr	ment		Debtor 1	Debtor 2 or non-filing spouse
dit i. Describe L	-			
supplying correct inform spouse. If you are separa attach a separate sheet to	nation. If you ated and you	are married and not filing wi	ng jointly, and your spouse is ith you, do not include informa	1 and Debtor 2), both are equally responsible for living with you, include information about your tion about your spouse. If more space is needed, and case number (if known). Answer every questic
Schedule I: Yo				12/
Official Form 1	<u>061</u>			MM / DD/ YYYY
				A supplement showing postpetition chapter 13 income as of the following date:
(If known)			-	☐ An amended filing
United States Bankruptcy  Case number 19-24		: WESTERN DISTRICT	Γ OF PENNSYLVANIA	Check if this is:
(Spouse, if filing)	laomi L. Kir	kpatrick		
Debtor 2 N				
_	esse E. Kir	kpatrick		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 6,141.61 4,527.05 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 0.00 3. 3. 0.00 +\$ Calculate gross Income. Add line 2 + line 3. 6,141.61 4,527.05

Official Form 106I Schedule I: Your Income page 1

Deb Deb		Jesse E. Kirkpatrick Naomi L. Kirkpatrick	=		Cas	e number ( <i>if known</i> )	19	9-24251			
					Fo	or Debtor 1		or Debtor			
	Copy	y line 4 here	4.		\$	6,141.61	9	on-filing s	•	.05	
5.		all payroll deductions:			Ψ_	0,141.01	,		,,,,,,	.00	
Э.		• •	<b>-</b> -		Φ	4 407 70	ď		07/		
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a 5b		\$ \$	1,127.72	9			2.98 0.00	
	5c.	Voluntary contributions for retirement plans	5c		\$-	0.00 65.41	9			.54	
	5d.	Required repayments of retirement fund loans	5d		\$ -	0.00	9			0.00	
	5e.	Insurance	5e		\$-	327.24	9			.00	
	5f.	Domestic support obligations	5f.		\$	0.00	9			.00	
	5g.	Union dues	5g	J.	\$	0.00	\$	; ————		.00	
	5h.	Other deductions. Specify: Health Care FSA		1.+	\$	150.61	+ \$	<u> </u>	(	.00	
		AFLAC	_		\$	52.69	\$	,	65	.01	
		AD&D Insurance			\$	13.63	\$	,	13	3.56	
		Parking			\$_	21.33	\$		45	.00	
		Loan	_		\$_	0.00	\$			.92	
		Uniform	_		\$_	0.00	9			.93	
		Life Insurance	_		\$_	0.00	\$			3.25	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,758.63	\$	-		2.19	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	4,382.98	\$	3,	404	.86	
8.	8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$	0.00	9	3		0.00	
	8b.	Interest and dividends	8b		\$	0.00	9			.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$ \$	0.00	9			0.00	
	8d.	Unemployment compensation	8d	ı.	\$	0.00	\$			.00	
	8e.	Social Security	8e	<del>)</del> .	\$	0.00	\$	<u> </u>		.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.		\$_	0.00	\$		(	0.00	
	8g.	Pension or retirement income	8g		\$_	0.00	\$			.00	
	8h.	Other monthly income. Specify:	_ 8h	۱.+ –	\$_	0.00	+ \$	<u> </u>	(	.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	0.00	\$	i		0.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		4,382.98 + \$		3,404.86	= 5	S	7,787.84
11.	Inclu other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•					0.00
12.		the amount in the last column of line 10 to the amount in line 11. The residual that amount on the Summary of Schedules and Statistical Summary of Certaines							\$		7,787.84
13.	Do y	ou expect an increase or decrease within the year after you file this form	?							mbin nthly	ed income
		No. Yes. Explain:									

Fill in this inforr	nation to identify your case:				
Debtor 1	Jesse E. Kirkpatrick		Ch	neck if this is:	
D.11.0				An amended filing	
Debtor 2 (Spouse, if filing)	Naomi L. Kirkpatrick			A supplement shown 13 expenses as of	wing postpetition chapter the following date:
	WESTERN BISTRICT OF BENNIS	22/12/24/14			
United States Bar	nkruptcy Court for the: WESTERN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
-	19-24251				
(If known)					
Official F	form 106J				
	e J: Your Expenses				12/15
information. If	re and accurate as possible. If two married people ar more space is needed, attach another sheet to this own). Answer every question.				
	scribe Your Household				
	oint case?				
□ No. Go	o to line 2.  oes Debtor 2 live in a separate household?				
	·				
	No Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househo	old of De	ebtor 2.	
2. Do you ha	ave dependents?				
Do not list Debtor 2.	Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
Do not sta	ite the				□ No
dependen	ts names.	Son		1 year	Yes
		Daughter		4 years	□ No ■ Yes
		Daugilloi			■ res □ No
		Daughter		5 years	Yes
					□ No
		Daughter		11 years	Yes
		Son		13 years	□ No ■ Yes
expenses yourself a	expenses include s of people other than and your dependents?				<b>—</b> 165
	imate Your Ongoing Monthly Expenses expenses as of your bankruptcy filing date unless y	you are using this form	m se s	supplement in a Ch	anter 13 case to report
	of a date after the bankruptcy is filed. If this is a supp				
	ses paid for with non-cash government assistance in such assistance and have included it on Schedule I: 1 106I.)			Your exp	enses
	I or home ownership expenses for your residence. It and any rent for the ground or lot.	nclude first mortgage	4.	\$	2,025.00
If not incl	uded in line 4:				
4a. Rea	al estate taxes		4a.	\$	0.00
	perty, homeowner's, or renter's insurance		4b.	·	0.00
	ne maintenance, repair, and upkeep expenses		4c.	\$	200.00
	neowner's association or condominium dues	mo oquity loons	4d. 5.	\$ \$	12.00
J. Additiona	Il mortgage payments for your residence, such as ho	me equity idans	ວ.	Ψ	225.00

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 32 of 62

Debtor 1 Jesse E. Kirkpatrick
Debtor 2 Naomi L. Kirkpatrick Case number (if known) 19-24251

## Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 33 of 62

ebtor 1	Jesse E. Kirkpatrick	Case number (if known)		
ebtor 2	Naomi L. Kirkpatrick	Case num	per (it known)	19-24251
Util	ities:			
<b>Uti</b> l 6a.	Electricity, heat, natural gas	6a.	\$	380.00
6b.	Water, sewer, garbage collection	6b.	\$	132.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	400.00
6d.	Other. Specify:	6d.	\$	0.00
Foo	od and housekeeping supplies		\$	1,400.00
	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	340.00
	sonal care products and services	10.	\$	150.00
	dical and dental expenses	11.	\$	350.00
	nsportation. Include gas, maintenance, bus or train fare.	• • • •	Ψ	330.00
	not include car payments.	12.	\$	585.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	aritable contributions and religious donations	14.	\$	20.00
Ins	urance.			
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
150	. Vehicle insurance	15c.	\$	200.00
150	. Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	cify:	16.	\$	0.00
Ins	allment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	432.00
17b	. Car payments for Vehicle 2	17b.	\$	458.00
170	. Other. Specify:	17c.	\$	0.00
170	. Other. Specify:	17d.	\$	0.00
You	ir payments of alimony, maintenance, and support that you did not report as		_	
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche			
	. Mortgages on other property	20a.	·	0.00
	. Real estate taxes	20b.		0.00
	. Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	. Homeowner's association or condominium dues	20e.	\$	0.00
Oth	er: Specify: Pre-School Tuition	21.	+\$	68.00
Pe	Care		+\$	100.00
Sc	nool & Work Lunches		+\$	120.00
Rir	g Doorbell (Security)		+\$	5.00
	pers		+\$	80.00
	•			
	culate your monthly expenses		<b>c</b>	7 700 00
	. Add lines 4 through 21.		\$	7,782.00
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	7,782.00
Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	7,787.84
	Copy your monthly expenses from line 22c above.	23b.		7,782.00
201	. Copy your monthly expenses from the ZZO above.	200.	<u> </u>	1,102.00
230	. Subtract your monthly expenses from your monthly income.			_
	The result is your <i>monthly net income</i> .	23c.	\$	5.84
	•			
	you expect an increase or decrease in your expenses within the year after yo			
	example, do you expect to finish paying for your car loan within the year or do you expect you ification to the terms of your mortgage?	r mortgage p	payment to incre	ease or decrease because o
_				
17	Ves Explain here:			

## Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 34 of 62

Fill in this infor	mation to identify your	case:			
Debtor 1	Jesse E. Kirkpatı	rick			
	First Name	Middle Name	Las	st Name	
Debtor 2	Naomi L. Kirkpat	rick			
(Spouse if, filing)	First Name	Middle Name	Las	t Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT OF PE	NNS	′LVANIA	
Case number	19-24251				
(if known)	10 24201				Check if this is an amended filing
		an Individual De			12/15
You must file thi	s form whenever you f	ile bankruptcy schedules or an	nende	ed schedules. Making a false state e can result in fines up to \$250,000	
Sign	n Below				
Did you pa	y or agree to pay some	eone who is NOT an attorney to	help	you fill out bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the summary	and s	chedules filed with this declaration	n and
X /s/.las	se E. Kirkpatrick		х	/s/ Naomi L. Kirkpatrick	
Jesse	E. Kirkpatrick re of Debtor 1			Naomi L. Kirkpatrick Signature of Debtor 2	

Date December 3, 2019

Date December 3, 2019

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 35 of 62

Fill	in this inform	nation to identify yo	our case:			
	btor 1	Jesse E. Kirkpa				
		First Name	Middle Name	Last Name		
1	btor 2 buse if, filing)	Naomi L. Kirkp First Name	Middle Name	Last Name		
'		okruptov Court for the	e: WESTERN DISTRICT C	NE DENINGVI VANIA		
Uni	ited States bar	nkruptcy Court for the	e: WESTERN DISTRICT C	OF PEININGTEVAINIA		
	se number _1	9-24251				☐ Check if this is an amended filing
	ficial For		l Affairs for Indivi	duals Filing for	Bankruptcy	4/1:
info nun	rmation. If m	ore space is needed n). Answer every qu		o this form. On the top of a		
			Marital Status and Where Yo	u Lived Before		
1.	What is your	current marital sta	itus?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have yo	u lived anywhere other than	where you live now?		
	□ No					
	_	t all of the places you	u lived in the last 3 years. Do r	not include where you live n	OW.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior	Address:	Dates Debtor 2 lived there
	11734 Joa Pittsburgh	n Drive ı, PA 15235	From-To: <b>May 2007 to</b> :	Same as Debte	or 1	Same as Debtor 1 From-To:
3. state	es and territorion  ■ No □ Yes. Ma	es include Árizona, C	California, Idaho, Louisiana, No	evada, New Mexico, Puerto		erritory? (Community property n and Wisconsin.)
4.	Did you have Fill in the total If you are filin	e any income from e	employment or from operati you received from all jobs and ou have income that you recei	all businesses, including pa	art-time activities.	s calendar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 36 of 62

Debtor 1 Jesse E. Kirkpatrick

Debtor 2 Naomi L. Kirkpatrick

Case number (if known) 19-24251

	Debtor 1		Debtor 2	
	Sources of income	Gross income	Sources of income	Gross income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$57,788.64	■ Wages, commissions, bonuses, tips	\$45,270.58
	☐ Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$60,369.00	■ Wages, commissions, bonuses, tips	\$52,271.00
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$-2,894.00
	☐ Operating a business		Operating a business	
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$126,758.00	■ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$2,622.00
	☐ Operating a business		Operating a business	
Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cast List each source and the gross incoming.  No Yes. Fill in the details.	pensions; rental income; interse and you have income that	rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; ar inly once under Debtor 1.	
	Dalifari		D-14 0	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		\$0.00	Capital Gain	\$635.00
For the calendar year before that: (January 1 to December 31, 2017)		\$0.00	Capital Gain	\$577.00
6. Are either Debtor 1's or Debtor 2  ☐ No. Neither Debtor 1 nor I individual primarily for a	Debtor 2 has primarily consumers personal, family, or househo	er debts? umer debts. Consumer debts old purpose."	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
During the 90 days before No. Go to line 7	ore you filed for bankruptcy, di	id you pay any creditor a total	I of \$6,825* or more?	

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

not include payments to an attorney for this bankruptcy case.

List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

 $\square$  Yes

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 37 of 62

De	otor 1 Jesse E. Kirl		Scriedules P	aye 37 01 02			
Del	otor 2 Naomi L. Kir	kpatrick		Cas	e number (if known)	19-24251	
			re primarily consumer del d for bankruptcy, did you pa		ıl of \$600 or more?		
	■ No. □ Yes		or to whom you paid a total domestic support obligation uptcy case.				
	Creditor's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Insiders include your r of which you are an of a business you operat alimony.	elatives; any general pa ficer, director, person in	cy, did you make a payme rtners; relatives of any gen- control, or owner of 20% of 1 U.S.C. § 101. Include pay	eral partners; partner r more of their voting	rships of which you g securities; and ar	u are a genera ny managing a	I partner; corporations gent, including one for
	■ No □ Yes. List all payr	nents to an insider.					
	Insider's Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insider? Include payments on o	you filed for bankrupto	cy, did you make any payo	ments or transfer a	ny property on ac	ccount of a de	ebt that benefited an
	■ No □ Yes. List all payr	nents to an insider					
	Insider's Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Pai	t 4: Identify Legal	Actions, Repossession	s and Foreclosures				
9.	Within 1 year before	you filed for bankruptoncluding personal injuryntract disputes.	cy, were you a party in an cases, small claims actions  Nature of the case				or custody
	Case number			o ,			
10.		nd fill in the details below . formation below.	cy, was any of your prope v. Describe the Property	erty repossessed, fo	oreclosed, garnis	hed, attached	Value of the
			Explain what happened	I			property
11.		o make a payment bec	otcy, did any creditor, incl ause you owed a debt?	luding a bank or fin	ancial institution	, set off any a	mounts from your
	Creditor Name and		Describe the action the	creditor took	Date a	action was	Amount
12.		you filed for bankrupto eiver, a custodian, or a	cy, was any of your prope nother official?	erty in the possessi	on of an assigned	e for the bene	fit of creditors, a

Official Form 107

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 38 of 62

Debtor 1 Jesse E. Kirkpatrick 19-24251 Debtor 2 Naomi L. Kirkpatrick Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$1,835.00 Steidl and Steinberg, P.C. October 21, 2019 Suite 2830 - Gulf Tower 707 Grant Street Pittsburgh, PA 15219 Summit Financial Education, Inc. \$14.95 October 21, 2019 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

made

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 39 of 62

Debtor 1 Jesse E. Kirkpatrick
Debtor 2 Naomi L. Kirkpatrick Case number (if known) 19-24251

	transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No  Yes. Fill in the details.	de as security (such as t	he granting of a se	curity interest or mortgage o	n your property). Do not
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		Describe any property or payments received or de paid in exchange	
	Three Rivers Volkswagon	2011 Dodge Rar \$9,000.00 Trade the new 2017 Do *Debtor owed m vehicle was wo	d in towards odge Ram nore than the		February 2019
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prod No ☐ Yes. Fill in the details.		y property to a se	elf-settled trust or similar d	evice of which you are a
	Name of trust	Description and v	Description and value of the property transferred		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Do you now have, or did you have within 1 years and the same statement of	, were any financial accour r other financial accour iations, and other finan Last 4 digits of account number	counts or instrumnts; certificates of acial institutions.  Type of account instrument	nents held in your name, or f deposit; shares in banks, t or Date account was closed, sold, moved, or transferred	credit unions, brokerage  Last balance before closing or transfer
21.	■ No ■ Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)	ess to it? D	escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit o  No Yes. Fill in the details.			ear before you filed for ban	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Des Schedules Page 40 of 62

Debtor 1 Jesse E. Kirkpatrick

Debtor 2 Naomi L. Kirkpatrick

Case number (if known) 19-24251

Pai	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty y	ou borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value
Pai	t 10: Give Details About Environmental Inform	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	nir, land, soil, surface water, groun	_	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law	, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s wa	aste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n th	ey occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e un	der or in violation of an environm	ental law?
■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	riron	nmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Pai	t 11: Give Details About Your Business or Con	•			
27.	Within 4 years before you filed for bankruptcy,	did vou own a business or have a	nv o	of the following connections to an	v business?
	■ A sole proprietor or self-employed in a	•	•	•	,
	☐ A member of a limited liability company			•	
	☐ A partner in a partnership	, ,		•	
	☐ An officer, director, or managing executive of a corporation				

☐ An owner of at least 5% of the voting or equity securities of a corporation

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 41 of 62

Debtor 1 Jesse E. Kirkpatrick Debtor 2 Naomi L. Kirkpatrick	Schedules Fage 41 01 (	Case number (if known) 19-24251
■ No. None of the above applies. Go to	Part 12.	
Yes. Check all that apply above and fil	I in the details below for each business.	
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
	name of accountant of bookscope.	Dates business existed
Naomi L. Kirkpatrick 107 Mowhark Drive	Consultant	EIN: XXX-XX-1254
Sarver, PA 16055	N/A	From-To April 2016 to Early 2019
■ No □ Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part 12: Sign Below		
	false statement, concealing property, or	I declare under penalty of perjury that the answers robtaining money or property by fraud in connection years, or both.
/s/ Jesse E. Kirkpatrick	/s/ Naomi L. Kirkpatrick	
Jesse E. Kirkpatrick	Naomi L. Kirkpatrick	
Signature of Debtor 1	Signature of Debtor 2	
Date December 3, 2019	Date December 3, 2019	
Did you attach additional pages to Your Statement No ☐ Yes	ent of Financial Affairs for Individuals Fil	ling for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is no ■ No □ Yes. Name of Person Attach the Bankru		

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 42 of 62

Fill in this infor	Fill in this information to identify your case:				
Debtor 1	Jesse E. Kirkpatr	ick			
	First Name	Middle Name	Last Name		
Debtor 2	Naomi L. Kirkpat	rick			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA					
Case number 19-24251					
(if known)					☐ Check if this is an
					amended filing

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.
 Identify the creditor and the property that is collateral
 What do you intend to do with the property that
 Did you claim the property

	,	secures a debt?	as exempt on Schedule C?
	Creditor's Keybank/usb Cc	☐ Surrender the property.	□ No
	name:	Retain the property and redeem it.	
	Description of 107 Mohawk Drive Sarver, PA	Retain the property and enter into a Reaffirmation Agreement.	Yes
	property 16055 Butler County	Retain the property and [explain]:	
	securing debt: *Fair Market Value determined by a current CMA	Retain & Pay	_
_	Creditor's PSECU	☐ Surrender the property.	■ No
	name:	☐ Retain the property and redeem it.	
	Description of 2017 Dodge Ram 1500 25,000	Retain the property and enter into a Reaffirmation Agreement.	Yes
	property miles securing debt: Location: 107 Mohawk Drive, Sarver PA 16055	☐ Retain the property and [explain]:	_
_			
	Creditor's PSECU	☐ Surrender the property.	■ No
	name:	☐ Retain the property and redeem it.	
	Description of 2014 Buick Enclave 60,000	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 43 of 62

		e E. Kirkpatrick ni L. Kirkpatrick	Case number (if known)	19-24251
	roperty ecuring debt:	miles Location: 107 Mohawk Drive, Sarver PA 16055	☐ Retain the property and [explain]:	-
n D p s	ame: escription of roperty ecuring debt:	16055 Butler County *Fair Market Value determined by a current CMA	<ul> <li>□ Surrender the property.</li> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>■ Retain the property and [explain]:</li> <li>Retain &amp; Pay</li> </ul>	□ No ■ Yes
n th	any unexpire e informatio	n below. Do not list real estate leases. U	s d in Schedule G: Executory Contracts and Unexpired Inexpired leases are leases that are still in effect; the f the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Des	cribe your u	nexpired personal property leases		Will the lease be assumed?
	sor's name:			□ No
	cription of lea perty:	ased		☐ Yes
	sor's name:	pend		□ No
_	perty:	iseu		☐ Yes
	sor's name:			□ No
	cription of lea perty:	ased		☐ Yes
	sor's name:			□ No
_	cription of lea perty:	ased		☐ Yes
	sor's name:			□ No
_	cription of lea perty:	ased		☐ Yes
	sor's name:			□ No
	cription of lea perty:	ased		☐ Yes
	sor's name:			□ No
_	cription of lea perty:	ased		☐ Yes
Par	3: Sign B	Below		
		perjury, I declare that I have indicated r subject to an unexpired lease.	ny intention about any property of my estate that sec	ures a debt and any personal
X		E. Kirkpatrick (irkpatrick f Debtor 1	X /s/ Naomi L. Kirkpatrick Naomi L. Kirkpatrick Signature of Debtor 2	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 44 of 62

	Jesse E. Kirkpatrick Naomi L. Kirkpatrick	Case number (if known) 19-24251	
Date	December 3, 2019	Date December 3, 2019	

Fill in this information to identify your case:  Debtor 1 Jesse E. Kirkpatrick	Check one box only as directed in this form and in Form 122A-1Supp:			
Debtor 2 (Spouse, if filing)  Naomi L. Kirkpatrick	☐ 1. There is no presumption of abuse			
United States Bankruptcy Court for the: Western District of Pennsylvania	2. The calculation to determine if a presumption of applies will be made under Chapter 7 Means T Calculation (Official Form 122A-2).			
Case number 19-24251	☐ 3. The Means Test does not apply now because o qualified military service but it could apply later			
	☐ Check if this is an amended filing			
Official Form 122A - 1				
<b>Chapter 7 Statement of Your Current Monthly</b>	Income	10/19		
Be as complete and accurate as possible. If two married people are filing together, both are attach a separate sheet to this form. Include the line number to which the additional informacase number (if known). If you believe that you are exempted from a presumption of abuse qualifying military service, complete and file Statement of Exemption from Presumption of Part 1:  Calculate Your Current Monthly Income	nation applies. On the top of any additional pages, write your na because you do not have primarily consumer debts or becaus	ame and e of		
What is your marital and filing status? Check one only.				
☐ Not married. Fill out Column A, lines 2-11.				
■ Married and your spouse is filing with you. Fill out both Columns A and B,	, lines 2-11.			
$\square$ Married and your spouse is NOT filing with you. You and your spouse a	are:			
☐ Living in the same household and are not legally separated. Fill out bo	•			
□ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).				
Fill in the average monthly income that you received from all sources, derived during th 101(10A). For example, if you are filing on September 15, the 6-month period would be March the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do no spouses own the same rental property, put the income from that property in one column only. I	1 1 through August 31. If the amount of your monthly income varied of include any income amount more than once. For example, if both	during		
	Column A Column B  Debtor 1 Debtor 2 or non-filing spouse			
Your gross wages, salary, tips, bonuses, overtime, and commissions (befo payroll deductions).	s 6,141.61 \$ 4,527.05			
Alimony and maintenance payments. Do not include payments from a spouse Column B is filled in.	e if \$ \$			
4. All amounts from any source which are regularly paid for household exper of you or your dependents, including child support. Include regular contributes				

Official Form 122A-1

Debtor 1 0.00

Debtor 1

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

0.00

-\$

\$

-\$

from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not

filled in. Do not include payments you listed on line 3.

5. Net income from operating a business, profession, or farm

Net monthly income from a business, profession, or farm \$

Gross receipts (before all deductions)

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

\$

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 46 of 62

Debtor 1 Naomi L. Kirkpatrick			Case num	ber (if known)	19-2425	51	
			Column Debtor 1		Column I Debtor 2 non-filin		
8. Unemployment compensation			\$	0.00	\$	0.00	
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	unt received was a benef	it under					
For you	\$0.0	00					
For your spouse	\$0.0	00					
9. Pension or retirement income. Do not include any benefit under the Social Security Act. Also, except as not include any compensation, pension, pay, annuity United States Government in connection with a disability, or death of a member of the uniformed sempay paid under chapter 61 of title 10, then include the does not exceed the amount of retired pay to which y if retired under any provision of title 10 other than chapter 61.	s stated in the next senter, or allowance paid by the bility, combat-related injurvices. If you received any at pay only to the extent to would otherwise be e	nce, do e ry or retired hat it	\$	0.00	\$	0.00	
10. Income from all other sources not listed above. So Do not include any benefits received under the Social received as a victim of a war crime, a crime against he domestic terrorism; or compensation, pension, pay, a United States Government in connection with a disability, or death of a member of the uniformed sensources on a separate page and put the total below.	al Security Act; payments numanity, or international annuity, or allowance paid bility, combat-related injui	or d by the ry or					
·			\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11. Calculate your total current monthly income. Add each column. Then add the total for Column A to the Part 2: Determine Whether the Means Test Applies	total for Column B.	\$	6,141.61	<b>-</b>	4,527.05		o,668.66
40. Oalanda a a a a a a a a a a a a a a a a a a	Fallacoth and atoms						
<ul><li>12. Calculate your current monthly income for the ye</li><li>12a. Copy your total current monthly income from lin</li></ul>	·		Co	ppy line 11	here=>	\$1	0,668.66
Multiply by 12 (the number of months in a year)						x 1	
12b. The result is your annual income for this part of	the form				1.	2b. \$ <b>12</b>	8,023.92
13. Calculate the median family income that applies t	to you. Follow these step	os:					
Fill in the state in which you live.	PA						
Fill in the number of people in your household.	7						
Fill in the median family income for your state and siz To find a list of applicable median income amounts, of for this form. This list may also be available at the ba	go online using the link sp	pecified	in the sepa	arate instru		3. \[ \\$ \] <b>12</b>	7,078.00
14. How do the lines compare?							
<ul><li>14a.</li></ul>	On the top of page 1, ch	eck box	1, There i	s no presur	nption of ab	use.	
14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	p of page 1, check box 2,	, The pre	esumption	of abuse is	determined	by Form 122	2A-2.
Part 3: Sign Below							
By signing here, I declare under penalty of perju	ury that the information or	n this sta	itement ar	nd in any att	achments is	s true and co	rrect.
X /s/ Jesse E. Kirkpatrick	<b>x</b> /	s/ Naor	ni L. Kirl	kpatrick			
Jesse E. Kirkpatrick		Naomi I	Kirkpa	trick			
Signature of Debtor 1	S	Signature	of Debto	r 2			

Jesse E. Kirkpatrick

Debtor 1

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 47 of 62

Debtor 1 Debtor 2	Jesse E. Kirkpatrick Naomi L. Kirkpatrick		Case number (if known)	19-24251
Dat	e December 3, 2019	Date	December 3, 2019	
	MM / DD / YYYY		MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			

If you checked line 14b, fill out Form 122A-2 and file it with this form.

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Schedules Page 48 of 62

Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Jesse E. Kirkpatrick	lines 40 or 42:
Debtor 2 Naomi L. Kirkpatrick (Spouse, if filing)	According to the calculations required by this Statement:
United States Bankruptcy Court for the: Western District of Pennsylvania	■ 1. There is no presumption of abuse.
Case number (if known) 19-24251	☐ 2. There is a presumption of abuse.
(II MIOMI)	☐ Check if this is an amended filing

### Official Form 122A - 2

# **Chapter 7 Means Test Calculation**

04/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	rt 1: Determine Your Adjusted Income	
1.	Copy your total current monthly income. Copy line	11 from Official Form 122A-1 here=> \$ 10,668.66
2.	Did you fill out Column B in Part 1 of Form 122A-1?  ☐ No. Fill in \$0 for the total on line 3.  ☐ Yes. Is your spouse Filing with you?  ☐ No. Go to line 3.  ☐ Yes. Fill in \$0 for the total on line 3.	
3.	Adjust your current monthly income by subtracting any part of you household expenses of you or your dependents. Follow these steps  On line 11, Column B of Form 122A–1, was any amount of the income y expenses of you or your dependents?  No. Fill in 0 for the total on line 3.  Yes. Fill in the information below:	
	For example, the income is used to pay your spouse's tax debt or support other than you or your dependents.  Total.	are subtracting from your spouse's income  \$ \$ \$ \$ \$
4.	Adjust your current monthly income. Subtract line 3 from line 1.	\$\$

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 49 of 62

Debtor 1	Jesse E. Kirkpatrick		
	Naomi L. Kirkpatrick	Case number (if known)	19-24251

Part 2:

#### **Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

7

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 3,046.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

#### People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ \_\_\_\_\_\_**55.00**
- 7b. Number of people who are under 65 X 7
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 385.00 Copy here=> \$ 385.00

#### People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114.00
- 7e. Number of people who are 65 or older X \_\_\_\_\_\_
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00
- 7g. Total. Add line 7c and line 7f \$ \_\_\_\_\_\_\_ \$ \_\_\_\_\_ \$ Copy total here=> \$ \_\_\_\_\_\_ \$ 385.00

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Schedules Page 50 of 62

Jesse E. Kirkpatrick Debtor 1 Debtor 2 19-24251 Naomi L. Kirkpatrick Case number (if known)

Local Standards Volument use the IPS Local Standards to answer the questions in lines 8-15

LOC	ai Sta	andards You must use the IRS Local Standards to ans	swer the	questions in iin	es 8-15.				
		n information from the IRS, the U.S. Trustee Program tcy purposes into two parts:	ı has div	vided the IRS L	ocal Stand	ard for h	ousing for		
_		ing and utilities - Insurance and operating expenses ing and utilities - Mortgage or rent expenses							
То	answ	er the questions in lines 8-9, use the U.S. Trustee Pro	ogram c	hart.					
		ne chart, go online using the link specified in the separate t may also be available at the bankruptcy clerk's office.	instruct	tions for this forr	n.				
8.		sing and utilities - Insurance and operating expense e dollar amount listed for your county for insurance and							676.00
9.	Hou	sing and utilities - Mortgage or rent expenses:							
	9a.	Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses				\$	1,411.00		
	9b.	Total average monthly payment for all mortgages and o	other det	ots secured by y	our home.				
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.								
		Name of the creditor	Avera	ge monthly ent					
		Keybank/usb Cc	\$	225.00					
		Wells Fargo Home Mortgage	\$	2,025.00					
		Total average monthly payment	\$	2,250.00	Copy here=>	-\$	2,250.00	Repeat this amount on line 33a.	
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) from I or rent expense). If this amount is less than \$0, enter \$0			\$		0.00 Copy	<b>\$</b>	0.00
10.	If yo	ou claim that the U.S. Trustee Program's division of t cts the calculation of your monthly expenses, fill in a	he IRS L any addi	₋ocal Standard itional amount	for housin you claim.	g is inco	orrect and	\$	0.00
	Ex	plain why:							
11.	Loc	al transportation expenses: Check the number of vehic	cles for \	which you claim	an ownersl	nip or ope	erating expense	).	
		). Go to line 14.							
	□ 1	. Go to line 12.							
	<b>=</b> 2	2 or more. Go to line 12.							
12.	Veh	icle operation expense: Using the IRS Local Standards						\$	851.00

Official Form 122A-2

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 51 of 62

Debtor 1 Debtor 2	Jesse E. Kirkpatrick Naomi L. Kirkpatrick			Case n	umber ( <i>if kr</i>	nown) 19	-24251	
	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.							
Vel	Describe Vehicle 1: 2017 Dodge Ram 1500 Drive, Sarver PA 16055		es Locatio	on: 10	7 Moha	awk		
13a.	Ownership or leasing costs using IRS Local Standard			\$	;	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.							
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.			at				
	Name of each creditor for Vehicle 1	Average m	onthly					
	PSECU	\$	432.00					
	Total Average Monthly Payment	\$	432.00	Copy	_	432	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0,	, enter \$0.		\$	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	Describe Vehicle 2: 2014 Buick Enclave 60, Drive, Sarver PA 16055		_ocation:	: 107 l	Mohaw	k		
13d.	Ownership or leasing costs using IRS Local Standard			\$	;	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not inclu	de costs fo	r				
	Name of each creditor for Vehicle 2	Average m	onthly					
	PSECU	\$	458.00					
	Total Average Monthly Payment	\$	458.00	Copy here =>		458.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense						Copy net	
	Subtract line 13e from line 13d. if this amount is less than \$0,	enter \$0			<b>.</b>	0.00	Vehicle 2 expense here => \$ _	0.00
14.	Public transportation expense: If you claimed 0 vehicles in Transportation expense allowance regardless of whether you				tandards	s, fill in the	Public \$ _	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>	hat you belie						0.00

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 52 of 62

Oth		in addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, social your pay for these taxes. How	nount that you will actually owe for federal, state and local taxes, such as income taxes, al security taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 m the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sa	ales, or use taxes.	\$	2,000.70
17.	Involuntary deductions: The contributions, union dues, and	ne total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payme	onthly premiums that you pay for your own term life insurance. If two married people are ents that you make for your spouse's term life insurance. Do not include premiums for life its, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	8.25
19.		The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthl  as a condition for your job	y amount that you pay for education that is either required: o, or		
	for your physically or men	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		60.00
	Do not include payments for	any elementary or secondary school education.	\$	68.00
22.	that is required for the health	enses, excluding insurance costs: The monthly amount that you pay for health care and welfare of you or your dependents and that is not reimbursed by insurance or paid include only the amount that is more than the total entered in line 7.		
	Payments for health insurance	ce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependents	<b>ephone services:</b> The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of d by your employer.		
	. ,	basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	100.00
24.	Add all of the expenses all Add lines 6 through 23.	owed under the IRS expense allowances.	\$	7,134.95

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 53 of 62

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.					
	Note: Do not include any expense allowances listed in lines 6-24.					
25. <b>Health insurance, disability insurance, and health savings account expenses.</b> The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.						
	Health insurance \$ 327.24					
	Disability insurance	\$144.89				
	Health savings account	+ \$150.61				
	Total	\$622.74	Copy total here=>	\$	622.74	
	Do you actually spend this total amount?					
	□ No. How much do you actually spend?  ✓ Yes	\$				
00	_ 100	· ————————————————————————————————————				
26.	Continued contributions to the care of household of continue to pay for the reasonable and necessary care your household or member of your immediate family while include contributions to an account of a qualified ABLE	and support of an elderly ho is unable to pay for su	y, chronically ill, or disabled member of och expenses. These expenses may	\$	0.00	
27.	<b>Protection against family violence.</b> The reasonably neafety of you and your family under the Family Violence					
	By law, the court must keep the nature of these expens	ses confidential.		\$	0.00	
28.	<b>Additional home energy costs.</b> Your home energy coline 8.	osts are included in your i	nsurance and operating expenses on			
	If you believe that you have home energy costs that are 8, then fill in the excess amount of home energy costs.		ergy costs included in expenses on line			
	You must give your case trustee documentation of your amount claimed is reasonable and necessary.	r actual expenses, and ye	ou must show that the additional	\$	0.00	
29.	<b>Education expenses for dependent children who ar</b> \$170.83* per child) that you pay for your dependent chipublic elementary or secondary school.					
	You must give your case trustee documentation of your claimed is reasonable and necessary and not already a		. ,			
	* Subject to adjustment on 4/01/22, and every 3 years a	after that for cases begur	on or after the date of adjustment.	\$	0.00	
30.	<b>Additional food and clothing expense.</b> The monthly higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS	s in the IRS National Star				
	To find a chart showing the maximum additional allowa instructions for this form. This chart may also be availal	-	·			
	You must show that the additional amount claimed is re	easonable and necessary	<i>I</i> .	\$	0.00	
31.	<b>Continuing charitable contributions.</b> The amount that instruments to a religious or charitable organization. 26		ntribute in the form of cash or financial	+\$	20.00	
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	642.74	

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 54 of 62

Deduct	ions for Debt Payment							
	debts that are secured by an interns, and other secured debt, fill in li	est in property that you own, including home nes 33a through 33e.	mortga	iges, vehicle				
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.							
1	Mortgages on your home:					verage monthly		
33a.	Copy line 9b here			=>	> \$	2,250.00		
	Loans on your first two vehicles:							
33b.	Copy line 13b here			==	> \$	432.00		
33c.	Copy line 13e here			=>	> \$	458.00		
	List other secured debts:							
Name of	each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes or insurance?	r			
				□ No				
-1	NONE-			☐ Yes	\$			
				_	-			
				□ No				
_				☐ Yes	\$			
				□ No				
				☐ Yes	+\$			
_								
					Copy total			
33e. T	otal average monthly payment. Add I	nes 33a through 33d	\$	3,140.00	here=>	\$ 3,140.00		
		secured by your primary residence, a vehic upport or the support of your dependents?	le,					
	No. Go to line 35.							
	Yes. State any amount that you mus listed in line 33, to keep posses Next, divide by 60 and fill in the	st pay to a creditor, in addition to the payments asion of your property (called the <i>cure amount</i> ). In information below.						
Name o	of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount		
-NON	E-		\$	÷	60 = \$			
		Tota	\$	0.00	Copy total here=>	\$		
		s a priority tax, child support, or alimony - thur bankruptcy case? 11 U.S.C. § 507.	at					
	No. Go to line 36.							
		these priority claims. Do not include current or s those you listed in line 19.						
	Total amount of all past-due p	priority claims	\$	0.00 ÷	60 =	\$		

### Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 55 of 62

Jesse E. Kirkpatrick Debtor 1 Naomi L. Kirkpatrick 19-24251 Case number (if known) Debtor 2 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link for Bankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. No. Go to line 37. ☐ Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense if you were filing under Chapter 13 3,140.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 7.134.95 expense allowances Copy line 32, All of the additional expense deductions 642.74 Copy line 37, All of the deductions for debt payment 3,140.00 10,917.69 10.917.69 Total deductions Copy total here....=> Part 3: **Determine Whether There is a Presumption of Abuse** 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 10,668.66 39b. Copy line 38, Total deductions 10,917.69 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Сору -249.03 -249.03 Subtract line 39b from line 39a here=>\$ x 60 For the next 60 months (5 years) Copy -14.941.80 -14.941.80 39d. Total. Multiply line 39c by 60 39d. \$ here=> 40. Find out whether there is a presumption of abuse. Check the box that applies: ■ The line 39d is less than \$8,175\*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ The line 39d is more than \$13,650\*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5. ☐ The line 39d is at least \$8,175\*, but not more than \$13,650\*. Go to line 41. \*Subject to adjustment on 4/01/22, and every 3 years after that for cases filed on or after the date of adjustment.

# Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 56 of 62

ebtor 1 ebtor 2		mi L. Kirkpatrick	Case number (if known)	19-24251
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled A Summary of Your Assets and Liabilities and Certain Statistical Informatio Schedules (Official Form 106Sum), you may refer to line 3b on that form.		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(		Copy here=> \$
25	% of y	ne whether the income you have left over after subtracting all allowed door unsecured, nonpriority debt. e box that applies:	leductions is enoug	h to pay
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>Ti</i> p Part 5.	here is no presumptio	n of abuse.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, chamption of abuse. You may fill out Part 4 if you claim special circumstances.		
art 4:	Giv	ve Details About Special Circumstances		
		we any special circumstances that justify additional expenses or adjustice alternative? 11 U.S.C. $\S$ 707(b)(2)(B).	ments of current mo	nthly income for which there is no
reas				
	o. Go	o to Part 5.		
	es. Fill ite Yo ne	to to Part 5.  I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The purpose of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.	ne expenses or incom	e adjustments
	es. Fill ite Yo ne ad	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  but must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation	ne expenses or incom	e adjustments inses or income
	es. Fill iter	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  but must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentatic justments.	ne expenses or incomon of your actual expe	e adjustments inses or income
	es. Fill itel Young	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.  The special circumstances is a detailed explanation of the special circumstances.	ne expenses or incomon of your actual expe	e adjustments inses or income expense
	es. Fill ite You ne add	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.  The property of the special circumstances with the special circumstances are considered as a detailed explanation of the special circumstances.	ne expenses or incomon of your actual expe	e adjustments inses or income expense lent 100.00
	es. Fill ite You ne add	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.  The property of the special circumstances where the special circumstances are considered by the special circumstances.  The property of the special circumstances are considered by the special circumstances are considered by the special circumstances.  The property of the special circumstances are considered by the special circumstances are considered by the special circumstances.	ne expenses or incomon of your actual expe	e adjustments inses or income  expense ient  100.00  120.00
□ N Y	es. Fill iter	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.  The property of the special circumstances  The prop	Average monthly or income adjustre	e adjustments nses or income  expense lent  100.00  120.00
□ N ■ Y	es. Fill itel You ne add	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.  The property of the special circumstances where the special circumstances are considered by the special circumstances.  The property of the special circumstances are considered by the special circumstances are considered by the special circumstances.  The property of the special circumstances are considered by the special circumstances are considered by the special circumstances.	Average monthly e or income adjustments  \$	e adjustments nses or income  expense nent  100.00  120.00  80.00
□ N Y	es. Fill itel Young add	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation in the special circumstances.  The property of the special circumstances  The propery of the special circumstances  The property of the special circu	Average monthly e or income adjustre  \$	e adjustments inses or income  expense ient  100.00  120.00  80.00
□ N ■ Y	es. Fill itel Young ad  G P Sig By sig X /s/ Je	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation in the special circumstances.  The property of the special circumstances  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of the property of the propert	Average monthly e or income adjustre  \$ \$ \$ tement and in any atta	e adjustments inses or income  expense ient  100.00  120.00  80.00
□ N ■ Y	es. Fill iter Young add	I in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.  The property of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation in the special circumstances.  The property of the special circumstances  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of Jesse E. Kirkpatrick  The property of the property of perjury that the information on this state of the property of the propert	Average monthly or income adjustre  \$ \$ \$ \$ tement and in any atta  Kirkpatrick of Debtor 2	e adjustments inses or income  expense ient  100.00  120.00  80.00

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 61 of 62

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Western District of Pennsylvania

In	Jesse E. Kirkpatrick Naomi L. Kirkpatrick			Case No.	19-24251
			Debtor(s)	Chapter	7
	DISCLOS	SURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)
1.	compensation paid to me wit	hin one year before the filing	b), I certify that I am the attor g of the petition in bankruptcy f or in connection with the ba	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have	e agreed to accept		\$	1,500.00
	Prior to the filing of this	s statement I have received		\$	1,500.00
	Balance Due			\$	0.00
2.	\$ <b>335.00</b> of the filing for	ee has been paid.			
3.	The source of the compensat	ion paid to me was:			
	■ Debtor □ (	Other (specify):			
4.	The source of compensation	to be paid to me is:			
	■ Debtor □ 0	Other (specify):			
5.	■ I have not agreed to shar	e the above-disclosed compe	ensation with any other person	n unless they are mem	bers and associates of my law firm
			tion with a person or persons nes of the people sharing in th		or associates of my law firm. A ached.
6.	In return for the above-discl	osed fee, I have agreed to re	nder legal service for all aspec	cts of the bankruptcy	case, including:
	<ul> <li>b. Preparation and filing of</li> <li>c. Representation of the det</li> <li>d. [Other provisions as need</li> </ul> One meeting and	any petition, schedules, state stor at the meeting of credito led] I analysis of your financ		th may be required; and any adjourned hea	
7.	Services in addit P.C. Examples o limited to; amen- the failure of the motions for relie	ion to the ones outlined fadditional work that we diments to bankruptcy so client to disclose or corf from stay, objections to	ould require payment of a chedules, adversary proc rect information contains	arately at the disc additional fees and eedings, lien avoiced in the bankrupt n agreements, and	retion of Steidl and Steinberg, costs include, but are not dances, any work related to cy petition, responses to attendance at additional
			CERTIFICATION		
thi	I certify that the foregoing is bankruptcy proceeding.	a complete statement of any	agreement or arrangement for	or payment to me for 1	epresentation of the debtor(s) in
	December 3, 2019		/s/ Kenneth Stei	dl	
	Date Date		Kenneth Steidl 3	34965	
			Signature of Attorn Steidl & Steinbe		
			28th Floor - Gulf	Tower	
			707 Grant Street Pittsburgh, PA 1		
				ax: 412-391-0221	
			kenny.steinberg	@steidl-steinberg	com
			Name of law firm		

Case 19-24251-CMB Doc 13-1 Filed 12/03/19 Entered 12/03/19 11:52:37 Desc Schedules Page 62 of 62

## United States Bankruptcy Court Western District of Pennsylvania

In re	Naomi L. Kirkpatrick		Case No.	19-24251
		Debtor(s) Chap	Chapter	7
	VERIFICATION OF CREDITOR MATRIX			
Γhe ab	ove-named Debtors hereby verify t	that the attached list of creditors is true and c	orrect to the best	of their knowledge.
Date:	December 3, 2019	/s/ Jesse E. Kirkpatrick		
		Jesse E. Kirkpatrick		
		Signature of Debtor		
Date:	December 3, 2019	/s/ Naomi L. Kirkpatrick		
		Naomi L. Kirkpatrick		

Signature of Debtor

Jesse E. Kirkpatrick